



Mountain Trekkers Self-Assessment Form

Name

Date

In an effort to better serve the community and to ensure the utmost quality of our programs, Montgomery County Parks and Recreation would like for you to take a moment and assess your own physical abilities.

Please rate the following:

I exercise (1 = never; 5 = every day)

My upper body strength is (1 = poor; 5 = excellent)

**I can independently walk or ambulate
2 miles over rough terrain
(1 = unable; 5 = easily)**

**I can lift 25 lbs. and carry it 100 yards
(1 = unable; 5 = easily)**

**My general physical condition is
(1 = poor; 5 = excellent)**

Montgomery County Parks and Recreation reserves the right of program flexibility due to the strenuous nature of the programs and may require medical clearance before participation. Staff members reserve the right to remove participants from a program if they are deemed an impediment to the overall enjoyment of the program.

By signing this document voluntarily without any inducement, you are acknowledging that you have read and understand the above information.

Date

Participant signature